

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010333

**Entity Name:** INSTITUTO BIBLICO NUEVA VISION, INC.

**Current Principal Place of Business:**

672 N SEMORAN BLVD, SUITE 202  
ORLANDO, FL 32807

**Current Mailing Address:**

3420 CIRQUE CIRCLE  
ORLANDO, FL 32817

**FEI Number:** 46-1163920

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVILA, ANA C PASTOR  
3420 CIRQUE CIRCLE  
ORLANDO, FL 32817 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** REV. ANA C DAVILA

04/08/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, PASTOR  
Name            DAVILA, REV. ANA C  
Address        3420 CIRQUE CIRCLE  
City-State-Zip: ORLANDO FL 32817

Title            TREASURER  
Name            QUILES, BEATRIZ  
Address        3420 CIRQUE CIRCLE  
City-State-Zip: ORLANDO FL 32817

Title            VP, PASTOR  
Name            NAZARIO, ANGEL  
Address        3420 CIRQUE CIRCLE  
City-State-Zip: ORLANDO FL 32817

Title            VP, PASTOR  
Name            DAVILA, RAMON  
Address        3420 CIRQUE CIRCLE  
City-State-Zip: ORLANDO FL 32817

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** REV. ANA C DAVILA

**PRESIDENT**

04/08/2024

Electronic Signature of Signing Officer/Director Detail

Date